



TRICARE

Your Military Health Plan

Retirement Benefits

SGT Tawny Gilmore
OKARNG TRICARE Manager
405-228-5226



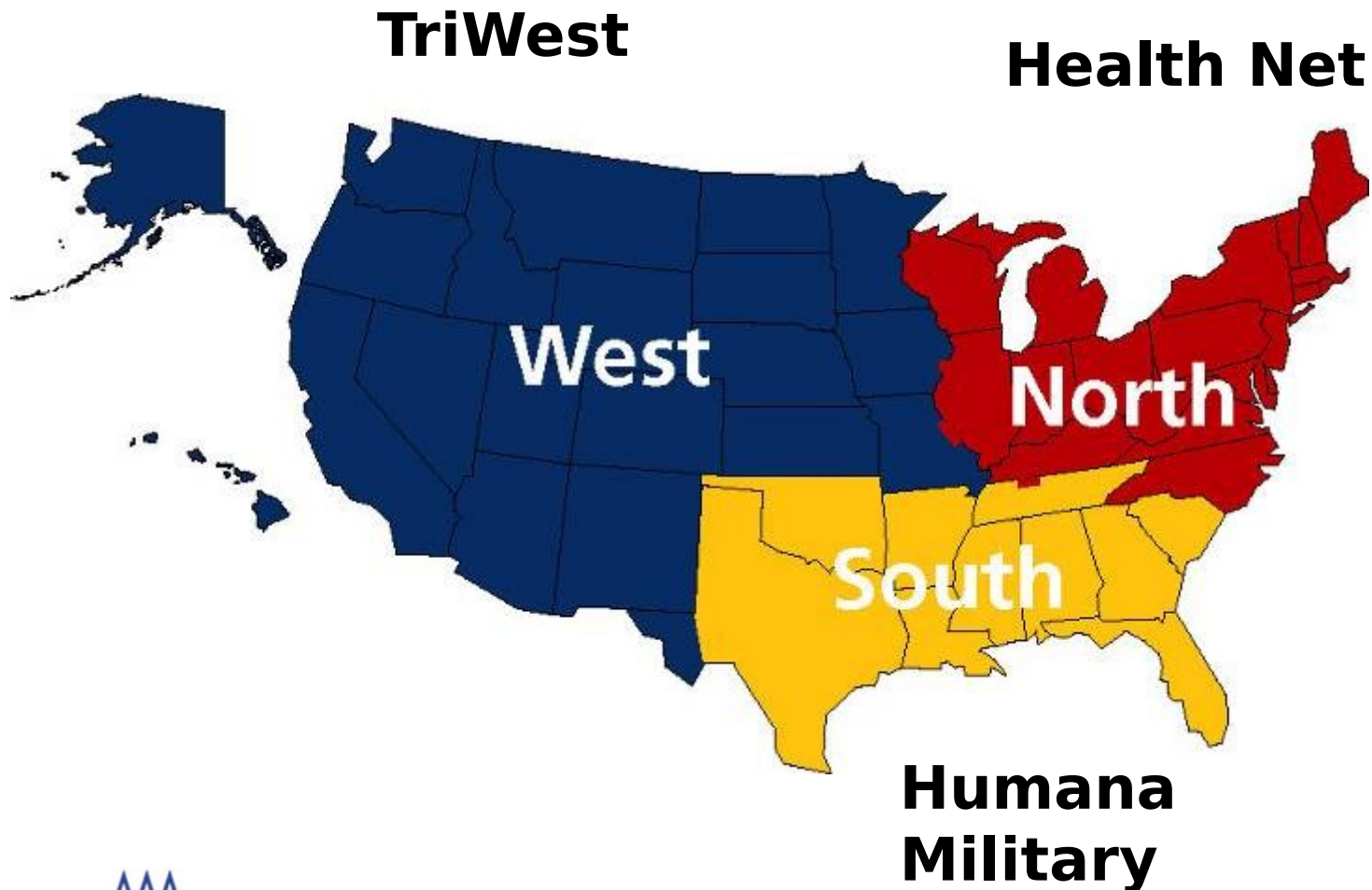
Version5 (Revised 2013)

Agenda

- TRICARE Coverage Areas
- Coverage Choices
- Other TRICARE Benefit Information



TRICARE Coverage Areas: **TRICARE Regional Contractors**



Updating DEERS/DMDC Information

- Change contact information
 - By phone: DMDC 1-800-538-9552
 - By fax: 1-831-655-8317
 - Online: www.tricare.mil/DEERS
 - BWE online: <https://www.dmdc.osd.mil/appj/bwe/>
- Make changes or add a family member
 - In person: Visit ID card-issuing facility
 - By mail: Send changes to the Defense Manpower Data Center Support Office



Retirement: **TRICARE Eligibility**

- Retired service members
- Spouses, surviving spouses and qualifying former spouses
- Unmarried dependent children
 - Eligible until age 21, or 26 if a full-time student
 - May be eligible beyond these age limits if child has a mental or physical incapacity
 - Remain eligible after parents divorce or remarry
 - Stepchildren lose eligibility after a divorce





Retirement

**Coverage Choices:
Age 60 to Medicare (65)**



Coverage Choices:

TRICARE Standard / Extra

- Automatic Enrollment/Coverage
- No enrollment or enrollment fee required
- No referrals required
- Prior authorization required services
 - Check regional contractor



TRICARE Standard / Extra: Getting Care and Cost Considerations

- Use any authorized provider, Find a Provider link located at www.humana-military.com or call 1-800-444-5445 (M-F) 8 a.m.-6p.m. ET
- Space-available care at MTFs
- Deductable: Individual \$150, Family \$300
- Copayments:
 - TRICARE Extra (20% Cost Share) Network provider
 - TRICARE Standard (25% Cost Share) Non-network provider



Retiree TRICARE Prime Coverage: **TRICARE PRIME**

- TRICARE Prime is a managed care option
- Enrollment Required
- Annual Cost:

Individual = \$269.28 Far

- No Deductible



Retiree TRICARE Prime Coverage: Getting Care

- Primary care received from Primary Care Manager (PCM) Civilian or Military.
- Military Treatment Facility (MTF) care on space-available basis unless assigned to a MTF
- PCM referral required for civilian specialty care
 - Otherwise, higher costs apply
 - To minimize costs, coordinate all care through your Primary Care Manager (PCM)



Retiree TRICARE Prime Coverage: Getting Out-of-Area Care

- Routine care: Get it **before** you travel
- Urgent care: Call your PCM or regional contractor for assistance
- Emergency care: Call 911 or go to nearest emergency room
- Long trips: To lower costs, transfer enrollment



Coverage Choices:

TRICARE For Life (TFL)

- For those Medicare Eligible (Disabled or Age 65)
 - Automatic enrollment/coverage **if you:**
 - Are entitled to premium-free **Medicare Part A (Hospital)**
 - Have **Medicare Part B (Out patient services)** coverage
 - Update **DEERS** pick up your New ID
 - **Recommend: Do NOT take Part D.** TRICARE Pharmacy is a better option
 - Uniform benefit worldwide
 - No enrollment fees (TFL)
 - Must pay Medicare Part B montly premium based on your income
- www.medicare.gov or call Social Security 1-800-772-1213



TRICARE For Life: Selecting a Provider

- U.S.: See any TRICARE-authorized provider
 - Medicare-participating: Accepts Medicare rate
 - Medicare-nonparticipating: May bill up to 115%
 - Opt-out provider: Medicare pays nothing; TRICARE pays 20%
- MTF care: On a space-available basis



TRICARE For Life: Claims and Customer Service

- Wisconsin Physicians Service (WPS) handles claims and customer service
 - For assistance: **1-866-773-0404**
- For more information on TFL:
 - **www.tricare.mil/tfl**



For Medicare-Eligible Family Members

- To remain eligible for TRICARE, Medicare Part A-eligible individuals must have Medicare Part B
 - Pay for and enroll in Medicare Part B before the sponsor's retirement date
- Medicare-eligible beneficiaries under age 65, disabled under Social Security: (Dual Eligible)
 - May enroll in TRICARE Prime; or
 - Use TRICARE For Life (TFL)





Retirement

Other TRICARE Benefit Information



Other TRICARE Benefit Information:

TRICARE Pharmacy Benefit

- Keep DEERS information up to date
- Need valid ID card
- DoD medication policy
 - Generic drug dispensed when available
 - Provider must justify medical necessity for a brand name to be dispensed
 - If no generic exists name brand will be dispensed



TRICARE Pharmacy Benefit:

TRICARE Pharmacy Options

1. MTF pharmacy

- **No cost → Free**
- Up to 90-day supply of most medications
- To locate an MTF: www.tricare.mil/mtf

2. TRICARE Mail Order Pharmacy (\$0-\$9-\$25)

- Convenient and low cost
- Up to 90-day supply of maintenance medications
- Member Choice Center (MCC): [1-877-363-1433](tel:1-877-363-1433)



TRICARE Pharmacy Benefit: TRICARE Pharmacy Options (cont.)

3. TRICARE retail network pharmacy

- More costly than mail-order option
- Up to 30-day supply (\$5-\$12-\$25)
- U.S., Guam, Puerto Rico and U.S. Virgin Islands

4. Non-network retail pharmacy

- Most expensive option (50%)
- Up to 30-day supply



Other TRICARE Benefit Information: **TRICARE Retiree Dental Program**

- Voluntary Enrollment
 - Coverage for you and eligible family members
 - Access to any licensed dentist in TRICARE coverage areas worldwide
 - Pay lower cost-share for network dentists*
 - Network dentists file claims for you
- * Delta Dental TRDP Contractor



Other TRICARE Benefit Information: **TRICARE Retiree Dental Program (cont.)**

- Enrollment required
 - Initial 12-month commitment
 - Monthly premiums are based on Zip Code
- Annual exams and cleanings
 - No cost for preventive services
- For additional details:
 - Online: www.trdp.org
 - By phone: **1-888-838-8737**



For Information and Assistance: **Other Contact Information** **(cont.)**

- Social Security Administration
 - Web site: www.ssa.gov
 - Phone: **1-800-772-1213**
- Medicare
 - Web site: www.medicare.gov
 - Phone: **1-800-633-4227**



NEW Benefit Programs

TRICARE Retired Reserve (TRR)
Healthcare Plan for Traditional Guard
Retirees under the age of 60.

TRICARE Young Adult (TYA) Program offers
benefits to dependent children up to
age 26.



TRICARE Retired Reserve (TRR)

ELIGIBILITY

- ❖ Retired Reserve who is qualified for non-regular retirement under 10 U.S.C., Chapter 1223
- ❖ Must be under age 60
- ❖ Not eligible for, or enrolled in, the Federal Employee Health Benefit Program

➤ **Note: TRR members must take action to disenroll from TRR if they become eligible for, or enrolled in ,the FEHB program**

DEPENDENT/SURVIVOR (based on sponsor's eligibility and enrollment status (Retiree))

- ❖ If sponsor was enrolled in TRR on the date of his/her death
- ❖ Immediate family members of the sponsor (spouses cannot have remarried)
- ❖ If sponsor dies while covered under TRR, the surviving family member(s) may purchase new or continue existing TRR coverage

➤ **Note: Survivor coverage is not affected by FEHB eligibility until the date on which the deceased member would have turned 60 years of age**



TRR CONTINUED

APPLICATION

- Can be done at any time throughout the year
- <https://www.dmdc.osd.mil/appj/reservetricare>
- Premium payment (two months) is required for the first payment
- **DD Form 2896-1**, Reserve Component Health Coverage Request Form

Note: If you do not qualify, you will not be able to complete or print the form. If you experience a technical problem call 1-800- 477-8227

- Mail the completed and signed **DD Form 2896-1** to your regional contractor



TRR Costs

Type of Coverage	2012 Premium Rates	2013 Premium Rates
Member-Only	\$419.72/mo \$5,036.64/yr	\$402.11/mo \$4,825.32/yr
Member-and Family	\$1,024.43/mo \$12,293.16/yr	\$969.10/mo \$11,629.20/yr
Retirees, their Family and TRR Deductibles		
TRICARE Prime	TRICARE Standard/Retired Reserve/ Young Adult	
No deductibles (Unless point of service is used)	\$150/person \$300/family	



TRICARE YOUNG ADULT (TYA) PROGRAM

ELIGIBILITY (Based on sponsor's eligibility status(Retiree))

- A dependent of an eligible sponsor
- Unmarried
- 21 to 26 years old
- Not eligible to enroll in an employer-sponsored health plan

ENROLL

If dependent not enrolled will need to be enrolled in DOES and DEERS once enrolled status must be eligible.

Information on adding family members if not enrolled in DEERS: www.tricare.mil/deers



(TYA) APPLICATION AND PURCHASING

TRICARE Young Adult Application

- www.tricare.mil/tya

Purchasing

TYA initial payment (equal to 2 months) can be paid by personal check, cashier's check, money order (made to regional contractor or US Family Health Plan Provider), or credit/debit card. (Standard \$304, Prime \$352) after that TYA premiums will be monthly (TYA Standard \$152, Prime \$176)

TYA applications by mail or fax.

South Region: Humana Military Healthcare Services, INC.

TRICARE YOUNG ADULT PROGRAM

P.O. BOX 538025

ATLANTA, GA 30353-8025

FAX NUMBER: 1-877-371-6661



TRICARE contract update:

- TRICARE T3 contract Update: Health Care deliver with Humana Military Healthcare Services began April 1, 2012 (South Region)
- 2013 TRICARE Retired Reserve and Young Adult
 - Beginning October 1, 2013 TRICARE Prime will no longer be available in certain areas of the United States due to the elimination of some TRICARE Prime Service Areas (PSAs). Visit www.tricare.mil/psa to access a Web-based Zip code tool to determine which areas are affected by the PSA changes. Does not affect pharmacy or dental coverage.



Continued

- September 30, 2013 Prime Enrollees (TRR/TYA) will be automatically disenrolled and a letter will be sent confirming disenrollment.
- Re-Enroll in Prime: Zip codes affected may reenroll back in Prime by waiving drive time standards (more than 50 miles) by reassigning PCM.



Why the Change?

- The Department of Defense (DoD) has planned to make PSA reductions since 2007, when proposals were requested for the next generation of TRICARE contracts (known as T-3). Bidders for the three U.S. regional contracts were only required to establish PSAs around military hospitals or clinics and in areas that lost military hospitals or clinics due to BRAC decisions.



Why the Change? Continued

- Although PSA reductions under T-3 were intended to take place simultaneously, contract delays in all three U.S. regions resulted in a staggered transition. DoD senior leadership determined that existing PSAs be kept in place until all regions could fully transition to T-3. The North Region transitioned in April 2011 and the South Region followed in April 2012. The West Region will be the final region to transition under a new contractor on April 1, 2013.



Why the Change? Continued

- In recognition of the need for beneficiaries to plan for critical health care decisions, PSAs will be continued in all regions until October 1, 2013, to coincide with the deadline for annual TRICARE Prime enrollments and fee adjustments.





Thank You

